POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*(signature)*	C789	12/26/12
O.I.P.E. CLASSIFIER		191	11/13
FORMALITY REVIEW	*(signature)*	71531	12-19-00
RESPONSE FORMALITY REVIEW	*(signature)*	71531	1-10-01

INDEX OF CLAIMS

✔	Rejected		N		Non-elected
=	Allowed		I		Interference
—	(Through numeral)... Canceled		A		Appeal
÷	Restricted		O		Objected

If more than 150 claims or 10 actions
staple additional sheet here

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BEST AVAILABLE COPY